

REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/605,720
	Filing Date	10/22/2003
	First Named Inventor	Daniel Suisa
	Art Unit	3624
	Examiner Name	
	Attorney Docket Number	FP2062

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I hereby revoke all previous powers of attorney given in the above-identified application.

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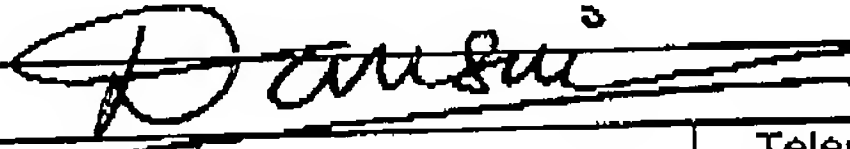
<input checked="" type="checkbox"/> Firm or Individual Name	DANIEL SUISA				
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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	Daniel Suisa		
Signature			
Date	May 31, 2004	Telephone	(+62) 816-835704

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. See below.

☒ Total of 1 forms are submitted.

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